PATENT APPLICATION	ON FEE DI		TION RECC	ORD	4.4		2	
CLAIMS A	SMALL TYPE	ENTITY	Ols	OTHEI SIAALL	R THAN ENTITY			
TOTAL CLAIMS	(Column		RATE	FEE		RATE	FEE	
FOR	NUMBER FILED NUMBER EXTRA			BASIC FI	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS	in.a.	20.		X\$ 9.4		00	X\$18±	
INDEPENDENT CLAIMS	_ mii	nus 3 =		X42:		OR	X84 ±	
MULTIPLE DEPENDENT CLAIM P		1.60	<u> </u>		± 280±			
		"/ ³ " u 3	coloron 2	+140-		JOB		
* If the difference in column 1 is			Cimpienes	TOTAL	L	J OH	TOTAL	
CLAIMS AS A (Column 1)	MENDED	(Column 2)	(Column 3)	SMALL	ENTITY	OR T	OTHER SMALL:	ENTITY
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
W Total · 11	Minus	27	=	X\$ 9=	/	OR	X\$18=	1
Total Jamendment Independent Jo	Minus	10	=	X42=		OR	- X84≖	
FIRST PRESENTATION OF MU	JLTIPLE DEPE	NDENT CLAIM		+140=		OR	± 280=	/
				TOTAL	-/	L	TOTAL	
				ADDIT, FEE	L	J () A	DOIT, FEE l	
(Column 1)		(Column 2) HIGHEST	(Column 3)		ADDI-	IΓ		ADDI-
m REMAINING		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE	-	RATE	TIONAL FEE
AFTER AMENDMENT Total *	Minus	**	=	X\$ 9=		OR	·X\$18=	
	Minus	***	=	X42=		OR	X84=	
FIRST PRESENTATION OF MU	LTIPLE DEPE	NDENT CLAIM		+140=		OR	+280=	
				TOTAL		L	TOTAL	
	, · · · · ·			ADDIT. FEE		OR A	DDIT. FEEL	
(Column 1)		(Column 2) HIGHEST	(Column 3)			· .		ADDI-
CLAIMS REMAINING AFTER AMENDMENT	٠	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	TIONAL
Total	Minus	54:	=	XS 9=		OR	X\$18=	
ž		***	=	X42=			X84=	
FIRST PRESENTATION OF MU	LTIPLE DEPE	NDENT CLAIM		747-		OR		
				+140=		OR	+280=	
 If the entry in column 1 is less than the If the "Highest Number Previously Pair 	d For IN THIS S	PACE IS IESS THAN	120, enter 20.	TOTAL ADDIT, FEE		OR A	TOTAL DOTT. FEE	
	d For IN THIS S For (Total or In	SPACE is less than dependent) is the	n 3, eater "3." highest number t		od etsinqox	cin colu	mn 1.	

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

. CLAIMS AS FILED - PART I (Column 1) (Columni2)						-	SMALL ENTITY TYPE		OR	OTHER THAN								
TOTAL CLAIMS							Г	RATE	FEE		RATE	FEE						
FOR			NUMBER FILED		NUMBER EXTRA		Ε	BASIC FEE	370.00	OR	BASIC FEE	740.00						
TOTAL CHARGEABLE CLAIMS			C. mir	(minus 20=		* *		X\$ 9=		OR	X\$18=							
INC	EPENDENT CL	AIMS	_ mi	nus 3 =	* 			X42=		OR	X84=							
Μ̈́L	ILTIPLE DEPEN	IDENT CLAIM F	PRESENT					+140=		OR	+280=							
* If the difference in column 1 is less than zero, enter "0" in column						column 2	L	TOTAL		OR	TOTAL							
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OTHER THAN SMALL ENTITY									
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
Ď.	Total	· 13	Minus	***	U	-		X\$ 9=		OR	X\$18=							
AMEI	Independent	· (C	Minus	***	8	24		·X42=		OR	X84=	168						
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=							
	,						L	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	10x b						
		(Column 1)		(Colu		(Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
Š Š	Total	. 21	Minus	** 2	0	= 7		X\$ 9=		OR	X\$18=	126						
AME	Independent	*) NTATION OF M	Minus	***	D.			X42=	,	OR	X84=							
<u> </u>	FIRST PRESE	NIATION OF M	OLIPLE DEF	CINDEIN	CLAIM		, L	+140=		OR	+280=							
							I A[TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	Da.						
		(Column 1)		(Colu		(Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
P	Total	. 27	Minus	** 6	27	=		X\$ 9=	1	OR	X\$18=							
ME	Independent	* 10	Minus	***	0	=		X42=		OR	X84=							
L	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	I CLAIM		1	+140=		OR	+280=							
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE																	
	The "Highest Num	nber Previously Pa	aid For" (Total o	r Independ	dent) is the	e highest number	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM PTO-875 (Rev. 8/01)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Effective October 1, 2000

Application or Docket Number

1272-60468

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		11					RATE	FEE	1	RATE	FEE		
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	<i>]]</i> min	nus 20= * 🗗				X\$ 9=		OR	X\$18=		
INC	EPENDENT CL	AIMS	Z mi	nus 3 =	. 6	5		X40=		OR	X80=	400	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	<u> </u>	1	+270=	900	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	l	TOTAL		OR		411.0	
	С	LAIMS AS A	MENDED	- PAR	TII			TOTAL		OR	OTHER	////	
e	port that again a second for a contract	(Column 1)		(Colur	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A	- Fac	CLAIMS REMAINING AFTER AMENDMENT	**	HIGHEST NUMBER PREVIOUSL PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
<u> </u>	FIRST PRESE	NIATION OF MO	JUIPLE DEF	PENDENT CLAIM				+135=		OR	+270=		
							_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	\$	(Column 1)		(Colur		(Column 3)	5.				7,0011.1 [22]		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	•	Minus [*]	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	01.411.4	-		X40=		OR	X80=		
<u> </u>	FIRST PRESE	NTATION OF MU	JETIPLE DEP	ENDENT	CLAIM	<u> </u>	ا ا	+135=		OR.	+270=		
			,				L A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)	10	,					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PREȘENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	ï	
AME	Independent	*	Minus	***		=		X40=			X80=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		╽┝			OR			
	• f the entry in colu	nn 1 is less than th	ne entry in colu	mn 2. write	"0" in co	ilumn 3.		+135=		OR	+270=		
**	If the "Highest Nu	mber Previously Pa mber Previously Pa	aid For IN THIS	S SPACE IS	s less tha	ın 20, enter "20."	. A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
	The "Highest Num	ber Previously Pai	d For" (Total or	Independe	ent) is the	nighest numbe	r four	nd in the app	ropriate box	in col	lumn 1.		